

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION III 841 CHESTNUT BUILDING PHILADELPHIA, PENNSYLVANIA 19107

November 8, 1990



PA. 7821

Dear

(b) (4)

This purpose of this letter is to summarize the discussion that we had on November 8, 1990 concerning EPA's inspection of your Shippensburg facility. This inspection is part of a combined effort of the RCRA and CERCLA programs. The RCRA office of this Division provides the list of sites from their database to the Site Assessment Section (CERCLA). We conduct the preliminary assessment (using NUS Corp.) and provide the information to both programs for evaluation.

The purpose of the inspection is to gather information on the site, observe waste handling/disposal practices, evaluate solid-waste management units, and evaluate potential migration routes leading from the site and targets of any such migration.

As noted above, the sites are chosen by the RCRA office due to previous filing of an application or other RCRA status. Information needed for review will include waste manifests, permits and related information, and information on the monitoring wells and sampling results. The inspection should take no more than 3 hours, and personnel with knowledge of the solid waste management units and waste disposal practices should be present if possible. No sampling is planned at this time.

I have asked Mr. Vince Shickora of NUS Corp. to call you to confirm the date and time, and to provide you with information on his authorization from EPA. If you need any additional information, please call me at (215) 597-8229.

Sincerely,

Gregory Ham

Site Investigation Officer

ORIGINAL (Red)

SKF USA Inc.



King of Prussia, PA USA ORIGINAL (Red)

November 2, 1990

United States Environmental Protection Agency Region III 841 Chestnut Building Philadelphia, PA 19107

Attn: Greg Ham

RE: Request for Access
TDD No. F3-9010-02

SKF Industries

Shippensburg, Pennsylvania

Dear Mr. Ham:

After several unsuccessful attempts to contact you by phone in reference to the above listed request for access, SKF must hereby formally notify you that the following information must be received in order for access to be granted to the above listed site. We have been in contact with Vincent Shickora concerning the intent of this visit but his information is somewhat incomplete.

Upon your response to the following questions, every effort will be made to accommodate Mr. Shickora during his planned visit.

- Exactly what is the intent of the planned inspection and what specifically will Mr. Shickora be looking for?
- Why was this SKF facility chosen for an inspection?
- What information will need to be made available for this visit?
- O What personnel will Mr. Shickora need to talk to?

- Will there be any samples taken at the facility and if so what type and will SKF have the opportunity to split samples with your representatives?
- O How long do you expect this inspection to last and how long should personnel be made available to Mr. Shickora?
- What is the exact date and time this inspection will take place?
- Please provide further documentation as to the qualifications and proof of EPA's authorization for Mr. Shickora.

As previously stated, SKF has every intent to comply with the request for Site access and will gladly do so as soon as the above information is received.



CWM:msb

cc:



999 WEST VALLEY ROAD WAYNE, PENNSYLVANIA 19087 215-687-9510



June 15, 1987 T-585-6-7-88 68-01-7346

Mr. Harold Byer U.S. Environmental Protection Agency 841 Chestnut Building Ninth and Chestnut Streets Philadelphia, PA 19107

Dear Mr. Byer:

Attached please find three uncontrolled copies of the final Preliminary Assessment for SKF Ind., Inc., Specialty Bearing Div., prepared under TDD No. F3-8701-61.

Please endorse below confirming that you have received the attached subject data and return the form to the above address.

Sincerely, (b) (4)

GG/nfs

Attachments

Signature:

Harold Byer

Date:



992 OLD EAGLE SCHOOL ROAD, SUITE 916 WAYNE, PENNSYLVANIA 19087 215-687-9510



March 30, 1987 T-585-3-7-96 68-01-7346 8701-61-05

Mr. Harold Byer
U.S. Environmental Protection Agency
841 Chestnut Building
Ninth and Chestnut Streets
Philadelphia, PA 19107

Dear Mr. Byer:

Attached please find four uncontrolled draft copies of the Draft Report for SKF Industries, Incorporated, Specialty Bearing Division, prepared under TDD No. F3-8701-61.

Please endorse below confirming that you have received the attached subject data and return the form to the above address.

(b) (4)	
GG/nmd	
Attachment	1 m a dud
Signature:	Harold Byer
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NUS CORPORATION AND S	UBSIDIARIES	ORIGINAL (Red)	TELECON NOTE
CONTROL NO: F3-8701-61	DATE: 3/24/87	TIME: /3	38
DISTRIBUTION:			
	<i>-</i>	Injour	
BETWEEN: Supervision of Aget	SKF, Speneally Bear	PHONE:	533-5800
AND: (b) (4)	(NUS FITTED)		
DISCUSSION: Return call of	la 1230 3/24/87 ca		ingrester
and TSD faulity non	est : C '	41	
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ACTION ITEMS:			

NUS CORPORATION AND	SUBSIDIARIES	ORIGINAL (Red)	TELECON NOTE
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John 2. North	13 N. P. Spendly Be	aring	184 3000 184417
(b) (4)			
DISCUSSION:	(NUS FIT III)		
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ACTION ITEMS:			

NUS CORPORATION

TELECON NOTE

CONTROL NO:	DATE:	TIME:
F3 670 / / .	-1-12-	0820
F3-870/-6/	2/24/87	0820
DISTRIBUTION.		
BETWEEN: (Marate Energy	OF:	PHONE:
Spenalist, Bell Meday	Mental OF: Ali SKF Industri	es (215)265-1900
AND:	nen	- 1700
		(NUS)
		(1403)
DISCUSSION:		
Due to milement	t weather, 2/23/s	7 work day
called off PA	vuit scheduled	la 2/23/87
- 0	And the second s	
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ACTION ITEMS:		

NUS CORPORATION AND SUBSIDIARIES

TELECON NOTE

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F3-8701-61	3/23/87	1100
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TDD Tile		
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AND: (b) (4)	(N45)	
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- a final machinger from	ies and the sent to to	Cassendy department,
ACTION ITEMS:		
11		

NUS.

3/3/87

(b) (4)

les requested by you on your Visit to S.K.V. God. in Philo, on 2/26/87, listed helow on waste generated at this plant

I. Waste ail and water - this is Coolant for our Guinder maching (Kutwell 50)

mode by Exxon.

2. Waste III Trichtorethan

3 Woste Sodium Hydraide Solution

4. Woste Petroleum naptha

If you have Other gustions, please wall.

b) (4)

RECEIVED

1987

NUS CORPORATION
REGION III
SENT TO

ORIGINAL (Red)

NUS CORPORATION

TELECON NOTE

CONTROL NO:	DATE:	TIME:
F3-8701-61	2/16/87	1150
DISTRIBUTION:	0/10/8/	
BETWEEN:	05.645 1 1 +	n PHONE:
	OF: SKF Industries	bec. (2/0-) 2/4- 12-
Mr. allen Bellenson	-, Esquad (b) (4)	(215)265-1900
(b) (4)		
		(NUS)
DISCUSSION:		0 100 01 11
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Remission given to	tire shotos of the outs	ede put of the plant.
alon Visit releduled	for Monday, February	23rd at 10 A.M. Mr
Bill M Loughlin un	I the plant manage,	Mr. John Mc Closkey on
	ange well accompany	
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apoken with simultane	usly.	
te e		
ACTION ITEMS:		



992 OLD EAGLE SCHOOL ROAD, SUITE 916 WAYNE, PENNSYLVANIA 19087 215-687-9510



8701-61-02

February 13, 1987 C-585-2-7-34 68-01-7346

Mr. Allen Belenson, Esquire SKF Industries, Incorporated 1100 First Avenue King of Prussia, Pennsylvania 19406

Subject:

Request for Site Access

SKF Industries

Philadelphia, Pennsylvania

of this office, has discussed with you, NUS Corporation is a contractor to the United States Environmental Protection Agency (EPA), Contract No. 68-01-7346, working on the Superfund Program as the Field Investigation Team. Under the authority of this contract, we have been tasked by EPA Region 3 to perform a preliminary assessment at the SKF Industries (Specialty Bearings Division) plant in Philadelphia, Pennsylvania. A preliminary assessment consists of a visual inspection of the subject site in order to determine whether there exists a potential threat of release of hazardous waste into the environment.

Access to the facility is requested for a mutually convenient time during the week of February 16, 1987. Attached is a Letter of Introduction stating that NUS Corporation is an authorized contractor to EPA. A copy of the Technical Directive Document tasking NUS to complete this project is also attached.

If you have any questions, please feel free to contact Respectfully,

GG/nmd

Attachment

ORIGINAL (Red)

NUS CORPORATION

TELECON NOTE

CONTROL NO:	DATE:	TIME:
	2/1-/20	DOUCE
F3-8701-61 DISTRIBUTION:	2/12/87	0845
DISTRIBUTION:		
BETWEEN: Bucky Pope, Man	age of OF: SKF Industries, &	PHONE:
BETWEEN: Bucky Pope, Man Industrial Relations AND:	Specialty Bearing	Dir (215) 533-5800
(b) (4)		(NUS)
DISCUSSION:		
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In the relation	assessment. Mr. Pop a Debruary 20th at	no gove Remiser
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95%		
		- 1
ACTION ITEMS:		
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Site Specific Amendment to Work Plan PA-1, Rev. No. 1

Site	SKF Industries, Inc., Specialty Bearings Div.
TDD No.	F3-8701-61
EPA Site No.	PA-815
Project Manager	(0) (4)
Date	2/12/87
Revision No.	0
Charge no.	PAH2PA

1) Check below the sections of the Work Plan PA-1, Rev. No. 1 which apply to this specific project:

<u> </u>	1.0	SUMMARY AND REQUIREMENTS
	2.0	PRELIMINARY ASSESSMENTS
	2.1	OVERVIEW
×	2.2	OBJECTIVE OF PRELIMIANRY ASSSSMENT
_	2.2.1	CHARACTERIZATION OF
	4.4	HAZARDOUS SUBSTANCES
4	2.2.2	IDENTIFICATION OF POLLUTANT
	4.4.4	DISPERSAL PATHWAYS
~	2.2.3	IDENTIFICATION OF RECEPTORS
	2.2.4	CHARACTERISTIZATION OF SITE
	*****	VANACEMENT PRACTICES
×	2.3	INFORMATION SOURCES FOR
		COST TURNARY ASSESSMENT
×	TABLE 2.1	INFORMATION AND SOURCE GUIDELINE
	2.4	SINDINGS OF PRETIMENANT COSCOSIONERS
关	3.0	SAFETY GUIDELINES
	3.4	
~	4.0	OPERATING GUIDELINES FOR
	4.0	THE SHOUTOPING FOLLEMENT
,	4.1	LISE CALIBRATION, AND MAIN LENANCE
	•••	
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X	4.6	A A A A A A A A A A A A A A A A A A A
		OF THE MSA OXYGEN INDICATOR
X	5.0	GUIDELINES FOR THE PERFORMANCE OF A
	,,,,	PRELIMINARY ASSESSMENT
X	6.0	LOGSOOK AND DOCUMENTATION
	• • • • • • • • • • • • • • • • • • • •	REQUIREMENTS
*	7.0	REPORT FORMAT
	7.1	NON-SAMPLING SITE RECONNAISSANCE
		SUMMARY REPORTS
X	7.2	SUMMARY REPORTS INTRODUCTION TO PRELIMINARY ASSESSMENTS
	7.3	PRELIMINARY ASSESSMENT REPORT
		CORMAT RECUIREMENTS
4	7.4	MAP FORMAT REQUIREMENTS
1	8.0	GENERAL INSTRUCTION FOR COMPLETING
7		EGB 44 T-2070-2
X	9.0	
-	10.0	water contest and Contest h
7		INVESTIGATION INFORMATION FORMS

1.A. COST CENTER:	FIT 70	NE I CONTRACT		2. NO.:
Region 3	CONTRA	ACT NO. 68-01-7346		F3-8701-61
1.B. ACCOUNT NO.:	TECHNICAL DI	RECTIVE DOCUMENT (T	DD)	2.A.: NEW ASSIGNMENT
S575PAH2PA	ri e			☐ AMENDMENT
3.A. PRIORITY:	4.A. ESTIMATE OF TECHNICAL HOURS:	5.A. SSID NO.:		EPORT FORM
☐ MEDIUM	_60	w	K FORMAL	REPORT FORMAL BRIEFING
Low	80	5.B. EPA SITE NAME:	LETTER F	
*		PA-815 / SKF Ind. Inc	7.A. START D	ATE: (SPECIFY):
3.B. KEY EPA CONTACT:	4.B. ESTIMATE OF SUBCONTRACT COST:	Spec. Bearing Div.	02/87	
NAME: L. Acker		STATE:	7.B. ESTIMAT	ED
PHONE: 597-3165		Phi ladelphia,		TION DATE:
		Philadelphia, PA.	04/10	0/87 DRAFT
8. TYPE OF ACTIVITY: X PA SI ES ENFORCEMENT SUPPO GENERAL TECHNICAL	ORT TRAINING		PORT SENT MAINTES	SPECIAL STUDIES
9. GENERAL TASK DESCR	IPTION:			
Conduct a Prelimin	ary Assessment of the	subject site.		p
		3000		
10. SPECIFIC ELEMENTS:			1	1. INTERIM DEADLINES:
1.) Review backgr	ound information.			
2.) Contact state a	and local agencies for	relevant information.		
3.) Arrange for sit	e access.			
4.) Conduct a brie	f on and off site inspec	ction to determine poter	ntial _	
sample locations.				
5.) Prepare and su	bmit preliminary asses	sment report including		
proposed sampling p	plan and rationale, if a	pplicable.		
6.) All work on thi	s project to be perform	ned according to:WP-PA	1-1, Rev 1.	
	*)			
ADDITIONAL SCOPE A	TTACHED			and the second s
12. COMMENTS:		•		
	State Code 04	2	County C	ode 101
13. AUTHORIZING:			1	4. DATE:
RPO DPO	PO	(SIGNATURE)		
- 4		(SIGNATURE)		0.0475
15. RECEIVED BY:	CEPTED WITH		1	6. DATE:
	EPTIONS (ATTACH)	CONTRACTOR SITOM CIONATI	IDE)	
	(0	CONTRACTOR FITOM SIGNATU	JKE)	





University of Pittsburgh

SCHOOL OF MEDICINE
Department of Medicine
Program in Occupational Medicine

Emergency Physician Access Plan

NUS Corporation, Superfund Division

December, 1983

A. MONDAY THROUGH FRIDAY, 9:00 A.M. - 5:00 P.M.

Dial the (412) 648-3240 number. When answered state that:

- (1) you are calling from NUS Corporation;
- (2) this is an emergency call.

Program staff will be alerted how to contact the physician designated to provide emergency coverage on that day. Collect calls will be accepted.

B. EVENINGS, WEEK-ENDS & HOLIDAYS:

Dial the (412) 648-3240 number. An operator from the answering service will answer the telephone. Do the following:

- (1) tell the operator that you are calling from NUS Corporation
- (2) tell the operator that this is an emergency call
- (3) give her your name
- (4) give her the telephone number where the physician is to call. Be certain that she has written the correct number (area code and seven digits)
- (5) if you do not receive a call back within 15 minutes place a second call to (412)648-3240

Collect calls will be accepted.

C. SITUATIONS WHERE EMPLOYEE REQUIRES IMMEDIATE TRANSPORT TO A HOSPITAL:

If the situation is life-threatening, ie., cardiac arrest or person not breathing call the emergency medical services system and transport the person to the nearest hospital with advanced life support capabilities.

After obtaining assistance as stated above, call the (412)648-3240 number and follow the procedures in A or B as appropriate.

TDD No.: F3-8701-61
Site Name: SKF Speciality Bearing Div.

ORIGINAL

(Red)

SAFETY PLAN

Address: Tulip + Konnedy St	Phone Nur
Site Name: SKF Industries, Inc. Spar. 1. Address: Tulip & Konnedy St. Philadelphia, PA	Other Cor
, ,	Carnorate Environmental Specialis
	Carporate Emmonmental Specialis 265-1900
Purpose of Site Visit:XPASI	Other (Specify)
Proposed Date of Work: 2 July Je	briany 20th 1987
Proposed Site Investigation Team:	
NUS Personnel:	Responsibilities:
(4)	S.17.L.
	ASITL /SO.
Other:	Purpose:
*	
Plan Preparation: (b) (4)	
Prepared by:	(2/2/87)
Reviewed by: Regional Health Safety Coo	(2/16/87)
110,401,011.100.11.000.01	7. 4.1.00 00 1
Approvals:	

TDD No.: F3-8701-61
Site Name: SKF Speakalty Bearing Dir.

Site History:	Unknown			
Waste Types: Characteristics:	Liquid Corrosive Volatile Unknown Other:	Solid Ignitable Toxic	Sludge Gas Radioactive Reactive	
Hazard Evaluation	_	91 1	······································	
Known or Suspec	ted Hazardous/Toxic Ma	terials: ///knan	/n	
Toxic and Pharm	acologic Effects: <u>V</u> X	nown		

Background Information:

TDD No.: F 3-8701-61
Site Name: SKF Specialty Bearing Div.

	ORIGO
	(Red)
Perimeter Establishment:	
Map/Sketch attached?	m
Perimeter identified?	no
Zone(s) of contamination identified?	_ma
Recommended Level(s) of Protection:	
o Respiratory: Level D	
Modifications: Monitor with HN	4. Afriday exceed
background, leave the ava an	I observe from a distance.
o Field Dress: <u>Safety boots</u> , work Antity glasses (af necessary)	
o Field Dress: Sofety boots, work Anfity glasses (if necessary.) Modifications: And dermal	
Safety glasses (af necessary.)	
Modifications: And demal Monitoring Procedures: Site Monitoring Equipment:	contact
Modifications: And dermal Monitoring Procedures: Site Monitoring Equipment: HNU	TLD Badge
Modifications: Anad dermal Monitoring Procedures: Site Monitoring Equipment: HNU OVA	TLD Badge Radiation mini-alert
Modifications: And dermal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac	TLD Badge Radiation mini-alert Explosimeter
Modifications: And demal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac Drager Tube & Pump	TLD Badge Radiation mini-alert Explosimeter O ₂ meter
Modifications: And demal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac Drager Tube & Pump Victoreen Radiation Detector	TLD Badge Radiation mini-alert Explosimeter O ₂ meter
Modifications: And demal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac Drager Tube & Pump	TLD Badge Radiation mini-alert Explosimeter O ₂ meter
Modifications: Anad dermal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac Drager Tube & Pump Victoreen Radiation Detector Other:	TLD Badge Radiation mini-alert Explosimeter O meter
Modifications: And demal Monitoring Procedures: Site Monitoring Equipment: X HNU OVA Photovac Drager Tube & Pump Victoreen Radiation Detector	TLD Badge Radiation mini-alert Explosimeter O meter

TDD No.: F3-8701-61
Site Name: SKF Specialty Bearing Div.

Decontamination and Disposal:

D	econtamination Procedure: (X) level to be utilized
Level A -	Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, suit and hard hat removal, SCBA backpack removal, inner glove wash, inner glove removal, inner clothing removal, field wash, redress.
Level B -	Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, suit/safety removal) SCBA backpack removal, inner glove wash, inner glove rinse, facepiece removal, inner glove removal, inner clothing removal, field wash, redress.
Level C -	Segregated equipment drop, boot cover and glove wash, boot cover and glove rinse, tape removal, boot cover removal, outer glove removal, suit/safety boot wash, suit/safety boot rinse (Canister or Mask Change), safety boot removal, splash suit removal, inner glove wash, inner glove rinse, facepiece removal, inner glove removal, inner clothing removal, field wash, redress.
Level D -	Segregated equipment drop, boot and glove wash, boot and glove rinse.
Modification	ns (specify): None
Disposal Procedure fo	r Investigation Derived Materials: Mrt applicable
Emergency Procedure	s for Overt Personnel Exposure:
o Skin Contact:	Wash immediately
o omi onitacti	w and immediately
o Inhalation:	Fresh air, artificial respiration if necessary, transport to hospital.
Ionizing Radiation:	Normal background 0.01 to 0.02 mR/hr
	If less than 2 mR/hr, continue investigation with caution.

If greater than 2 mR/hr, evacuate site.
* Note: Background 10-20 CPM on mini-alert

Site Name: SKF Specially Bearing Air.

PA (SI, PA, site

The MSDSs identified below are applicable to the recon, etc.) for the KF specular (site name) (TDD No. F3-9701 - 61):

	VOA Standards
acetone alcohol anhydrous* air (breathing) alconox amyl acetate (banana oil) carbon monoxide gas gasoline hexane hydrogen isopropyl alcohol magnesium perchlorate* mercuric acetate powder* methanol nitric acid nitrogren pH buffer 4.0	benzene toluene carbon tetrachloride trans-1,2-dichloroethene* trichloroethene* tetrachloroethene* vinyl chloride o-xylene m-xylene p-xylene chloroform ethyl benzene
nitric acid nitrogren pH buffer 4.0 pH buffer 10.0 phosphoric acid* smoke tubes sodium hydroxide spray paint* stannic chloride sulfuric acid* 1,1,1-trichloroethane	
zinc acetate dihydrate	

Prepared by Site Leader:

Signature

2)	Check bel	ow to indicate the doc	uments which will be g	enerated in the course
	of the pro	ject (both deliverable	and non-deliverable):	ORIGIN
		m. 1 m		(Red)
		Final Report		•
		Draft Report	E	
		Log Book		
	<u>X</u>	Photographs and Neg	gatives	
	12/12/13	oWell Questionnaires		
	7	Safety Plan		
		Site Safety Follow-u		
		Task Related Corres		
	*	Report Processing F	orms	•
	*	Telecon Records		
	×	TDD		
		EPA File Information		
		State File Informati	on	
	<u>X</u>	Completion Docume	nt	
3)		e. planned deviations	from or additions to th	during the course of the e Work Plan PA - 1,
			0	

4) Attach to this work plan the following items:



TDD Site Safety Plan

5) Complete the following work plan checklist:

Indicate where the item may be found or indicate N/A

TDD, SSP, WPA TPD, WPA TDD WPA GWP, TDD WPA TDD TDD , 55P 35 P 55P GWP NIA GWP, TDD GWF TDD, GWP GWP GWF 55 P SSP

Item

- SDD/TDD/ WA number
- EPA site identification
- Description of assignment .
- Technical approach
- Task breakdown of assignment
- Account number
- Estimated technical hours
- Estimated subcontract cost
- 9. Priority of work
- Project Manager identification 10.
- 11. Project personnel requirements
- 12. Personnel assignments
- 13. Schedule for activities
- 14. Milestones
- 15. Background data
- 16. Data assessment summary
- 17. Required resources list
- 18. Cost and budjet management
- 19. Procurement planning
- 20. Special training requirements
- 21. Interface requirements
- 22. Access requirements planning
- 23. Documents to be generated
- 24. Management reports
- 25. Report/ product requirements
- 26. Report/ product review
- 27. Quality control requirements
- 28. **Ouality assurance requirements**
- 29. Community relations assistance requirements
- Emergency planning considerations 30.
- Health and safety requirements 31.

TDD - Technical Pirective Document SSP- Site Safety Plan GWP- Generic Work Plan for PA's- PA-1, Rev-1 WPA- This Work Plan Ammendment



(b) (4)	Paviated & Approved by	Paviawed & Approved by	Deviewed to 4
IIILE	Assistant Manager	regional Project Manager	Regional QA Repres

The undersigned have received, read, and understood this work plan amendment and all documents listed in item 4. (Must be signed by all project personnel.)

Name (b) (4)	Date
	2/12/87
E .	
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Note: This document, in conjuction with Work Plan PA-1, Rev. No. 1; the TDD and the Site Safety Plan fulfill the requirements of QAP 2.5 as found in the NUS Corp. Superfund Division Quality Assurance Manual Issue B.

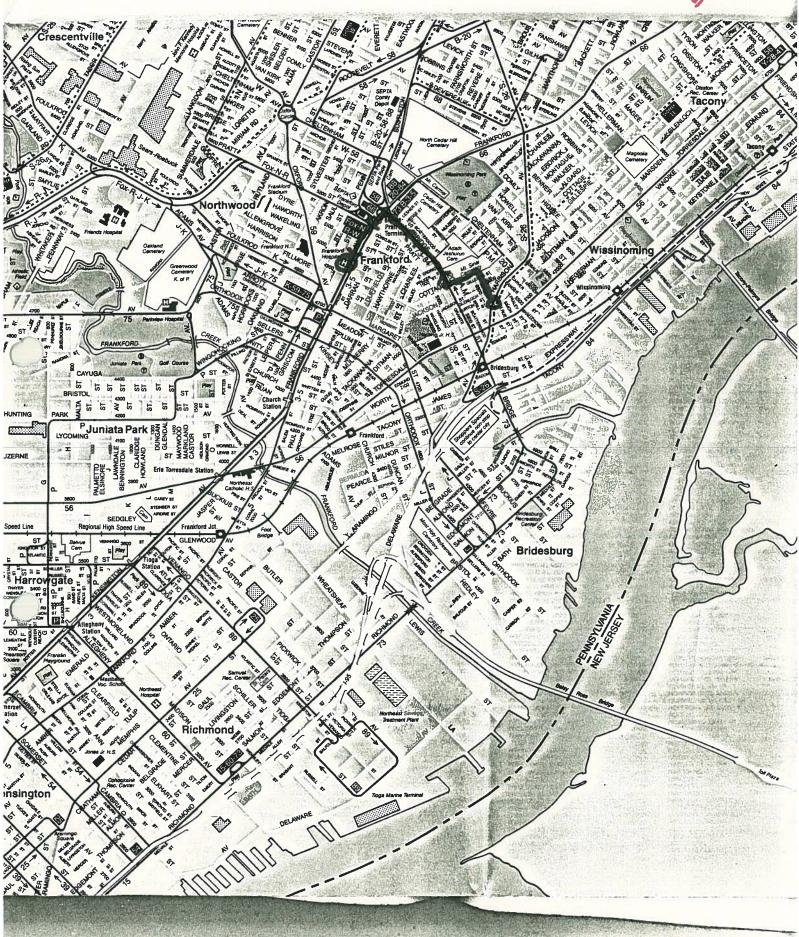
	F3-8701-61	
Site Name	SKF Specialty Ban	ungs Dir.
	ORIO	9/AL
	Rec	T) AL

1	oca	I R	esou	irc	Ac.
_	uca.	1 1	COUL	II C.	C.5.

Local Resources:	
Ambulance (Name): (ty of Chiladelphi) Hospital (Name): 2 years of the special despital	Phone 911
Police (Local or State):	Phone \$31-2000
Fire Department (Name & Volunteer?):	Phone 911
Radio Channel:	THORE THE
Nearest Phone:	
Office Resources:	
Region III FIT Office	(215) 687-9510
EPA DPO Harold <u>Byer</u>	(215) 597-3437
Office Manager -(b) (4)	
Operations Manag Safet <mark>(b) (4)</mark>	
Safet	
Zone,	
Emergency Contacts: (Medical and Health)	
o NUS Consulting Physician - University of Pittsburgh	
Office	(412) 648-3240
Please follow procedures as outlined on the following page	
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o (NUS Zone Health and Safety Manager)	
Office	(b) (4)
Home	
o Regional Health Maintenance Program (Thomas Jefferso	on Hospital)
(b) (4)	(b) (4)

o Poison Information Center	(215) 922-5523
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o National Response Center	(900) 121, 0000
o National Response Center(FOR ENVIRONMENTAL EMERGENCY ONLY)	(800) 424-8802
Directions to Hospital (Attack to M. A. A. A.	111 , 12
Directions to Hospital (Attach Map): North on Kennedy &	eft onto Collage
Street Pight on Bridge Street, Left onto Flank	ford Street. Hospital
on right.	







PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL RESOURCES Division of Hazardous Waste Management P. O. Box 2063 Harrisburg, PA 17120

8701-61-07

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TRANSPORTER FACILITY

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State of New Jersey **Division of Waste Management** CN 028, Trenton, NJ 08625

Department of Environmental Protection 01-61-09 (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2010-0404. Expires 7-31-86 1 Gengrators US EPA ID No **UNIFORM HAZARDOUS** Paul Information in the shaded areas of is not required by Federal law * **WASTE MANIFEST** A. State Manifest Document Number B State Gen ID Transporter 1 Company Name ENV PONDIENTAL TIANSFOR Transporter 2 Company Name ENVIRONMENTAL TIANSFIRME 9 Designated Facility Name and Site Address
All VANCE ENVIOLETT Tochnolo 6/ Cof Goldmine PJ NT 07836 WJDD1210631 56 7 H. Facility's Phone 12. Containers 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Quantity Waste No · WASR Sodiem Midloxide, Soloton Marosof CERROSIVE MATERIA DWASTE GRASSIVE Solid nos UN1754 GOI DM GO 300 CORRISIVE MATERIAL J Additional Descriptions for Majerials Listed Above Sodium ////o/ide So/u//ion Handling codes for Wastes Listed Above Sodien hydrolide Studge + UrRniculite 15. Special Handling Instructions and Additional Information

PACKING SIPS ATTACK I FR Clarification inas Portation Perposes only GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable Date and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment Transporter 1 Acknowledgement of Receipt of Materials of Materials Signa; 19 Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item; 19.

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Signature

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